BSc (Hons) Midwifery

Handbook 2018-19
1. INTRODUCTION FROM THE COURSE DIRECTOR

Dear Student

I am delighted to welcome you to the BSc (Hons) Midwifery Long Programme and hope that your studies with us over the next three years will be both fulfilling and rewarding.

The programme has been validated by the Nursing and Midwifery Council (NMC) and will provide you with a sound basis from which to develop your career as a midwife.

Midwives must make sure the needs of the woman and her baby are the primary focus of midwifery practice and work in partnership with the woman and her family to provide safe, responsive, compassionate care, considering physical and emotional health throughout childbirth.

From the outset you will be encouraged to consider the impact of partnership working with women and their families. By valuing your experiences and contribution it is anticipated that as you develop knowledge and skills in midwifery practice you will in turn value women’s experiences.

The future of the profession is evolving, changing and pioneering and we hope that you are as excited as we are about this programme and the possibilities for the future of the midwifery workforce.

Yours sincerely

Nicky Hadlett
Course Director
2. UEA STUDENT HANDBOOK, STUDENTZONE AND COURSE HANDBOOK

The central UEA student handbook contains information about all key UEA policies and guidance and is for all students studying on undergraduate and postgraduate taught programmes. It aims to give new and continuing students a central reference point for University-wide regulations, processes and guidance to help and support you through your studies. You can find information about these topics:

i. The advising system
ii. Learning and Teaching Services
iii. Communication
iv. The Student Portal and e:Vision
v. Campus cards
vi. Student finances
vii. The Student Support Service
viii. Regulations
ix. Health and safety
x. Generic course information
xi. Marking criteria
xii. Timetables
xiii. Coursework submission and returns
xiv. Examinations
xv. University dates for 2018-19
xvi. Appeals and complaints
xvii. Equality and inclusion for students
xviii. Student representation and feedback

This list only summarises the main headings; for full details of the content refer to the handbook itself.

Information contained in the central UEA student handbook will not be repeated on the HSC Studentzone Blackboard site. Any general information regarding your taught provision within HSC will be summarised in this handbook and can also be found on the HSC Studentzone Blackboard site.

All information specific to your programmes of study can be found in your course handbook (this handbook), your course specific Blackboard site and via the New-Student Website.

In addition to this Midwifery students will also have electronic access to the following:

**The Assessment of Practice Documentation**

There is one for each year of the programme. It includes your ‘Assessment of Practice’ records for each module of the respective year and will be given to you at the outset of each year. Module details (e.g. content, assessment and practice information), which is supplemented by a timetabled session at the outset of each module is available on your Blackboard site in the relevant module and assessment folders.
Theory and Practice Assessment Guidelines
Includes the assessment guidelines for your theoretical assessments and the process and requirements for the assessment of practice within the programme. This document will be available to you electronically on your programme Blackboard site at the outset of the programme so that you are aware of all assessments from the outset.
3. COURSE OVERVIEW/PROFILE

The School of Health Sciences, University of East Anglia, delivers a robust, contemporary programme of midwifery education to prepare you to become eligible for registration as a midwife. The curriculum will enable you to meet the EU Midwives Directives (EC 2005), NMC (2009) standards for pre-registration midwifery education and QAA midwifery subject benchmarking (2001), and take your place as future agents of change within a climate of evolving midwifery practice.

The provision of maternity care and midwifery education has, alongside other health and social care professions, undergone major changes. The Midwifery 2020 (Midwifery 2020 Programme 2010) reinforced the importance of a midwifery rather than medically led maternity service, placing the woman in a pivotal position to influence her care. The National Service Framework for children, young people and maternity services (DH 2004) has helped focus on the needs of all women, including those from vulnerable groups. Both demand that the midwife of the future be flexible, proactive and assertive and take responsibility for continuing professional learning and development. Better Births (2016): the national review of maternity services: presented an ambitious vision for the planning, design and delivery of services. As a midwifery practitioner, analysis and decision-making based upon contemporary evidence will need fundamental skills which underpin and inform all your professional activities. These qualities will consequently permit flexible and adaptable approaches to problem solving and enable you as a practitioner to operate within the dynamic and changing maternity health care service.

From the outset you will be encouraged to consider the impact of partnership working with women, fathers and their families. By valuing your experiences and your contribution you will in turn value women’s experiences.

Student-centred learning opportunities are a key feature of the programme philosophy. This gives further emphasis to the value of your experiences, whilst adapting your skills of enquiry, problem solving and team working for a midwifery context. The small group environment fosters opportunity for discussion of issues in depth, contributing to the development of graduate skills. Student-centred approaches are mirrored in the practice arena by placing women at the focal point of care throughout the programme. Adopting this philosophy places value on women’s views and choices in their care and places women in control of their care pathway.

Reflection on your practice is a component of the programme, while leadership skills incorporate your existing knowledge and experience for a midwifery context. This includes inter-professional and interagency practice.

The midwifery teaching team are strongly committed to supporting you throughout your programme, valuing your individual experiences and needs. You will have a named personal adviser for the duration of the programme enabling the development of an academic relationship adding support to your learning experiences across the programme. There is a named midwifery link lecturer for each placement area used by student midwives. This enables a lecturer familiar with the programme to support you in the practice environment and to support the tri-partite assessment of practice. Module organisers are also available to provide support in the context of their
module specific element of the programme. In addition to these support mechanisms the course director and Lead Midwife for Education (LME) are both available to offer you guidance and support should this be required.

The programme comprises of three years of study which provides 135 programmed learning weeks of theory and practice with 21 weeks of vacation time. This is arranged as 45 programmed learning weeks and seven vacation weeks per annum.

| Year One |
|------------------|------------------|------------------|
| **MODULE TITLE** | **MODULE CREDITS** | **ACCUMULATED CREDITS** |
| Foundations for Practice | 60 credits at Certificate Level | 60 credits at Certificate Level |
| Promoting Healthy Lifestyles | 60 credits at Certificate Level | 120 credits at Certificate Level |

By end of Year One, you will have accrued 120 credits at Certificate level or an exit qualification of a Certificate of Higher Education.

| Year Two |
|------------------|------------------|------------------|
| **MODULE TITLE** | **MODULE CREDITS** | **ACCUMULATED CREDITS** |
| Health and Social Complexities | 60 credits at Diploma Level | 120 credits at Certificate Level |
| Complex Childbearing | 60 credits at Diploma Level | 120 credits at Certificate Level |

By end of Year Two, you will have accrued 120 credits at Certificate Level and 120 credits at Diploma Level or an exit qualification of a Diploma of Higher Education.

| Year Three |


### Module Titles and Credits

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Credits</th>
<th>Accumulated Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childbearing in the wider context and the Neonatal Infant Physical Examination</td>
<td>60 credits at Degree Level</td>
<td>120 credits at Certificate Level, 120 credits at Diploma Level, 60 credits at Degree Level</td>
</tr>
<tr>
<td>Leadership, Innovation and Competent Practice</td>
<td>60 credits at Degree Level</td>
<td>120 credits at Certificate Level, 120 credits at Diploma Level, 120 credits at Degree Level</td>
</tr>
</tbody>
</table>

By end of Year Three, you will have accrued 120 credits at Certificate Level, 120 credits at Diploma Level, 120 credits at Degree Level, and when all course requirements are completed an exit qualification of a BSc (Hons) in Midwifery and you will be eligible to apply to the NMC for entry to the Professional Register.

### Distribution of Curricular Weeks/Hours:

<table>
<thead>
<tr>
<th>Year</th>
<th>Module One: Foundation for Practice</th>
<th>Module Two: Promoting Health Lifestyles</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Spans 22 weeks including two weeks vacation</td>
<td>Spans 30 weeks including five weeks vacation</td>
</tr>
<tr>
<td></td>
<td>Theory 337 hrs 45 days</td>
<td>Theory 412.5 hrs 55 days</td>
</tr>
<tr>
<td></td>
<td>Practice 412.5 hrs 55 days</td>
<td>Practice 525 hrs 70 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Module Three: Complex Health and Social Needs</th>
<th>Module Four: Complex Childbearing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Spans 22 weeks including two weeks vacation</td>
<td>Spans 30 weeks including five weeks vacation</td>
</tr>
<tr>
<td></td>
<td>Theory 337.5 hrs 45 days</td>
<td>Theory 412.5 hrs 55 days</td>
</tr>
<tr>
<td></td>
<td>Practice 412.5 hrs 55 days</td>
<td>Practice 525 hrs 70 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Module Five: Childbearing in the wider context and the Neonatal Infant Physical Examination</th>
<th>Module Six: Leadership, Innovation and Competent Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Spans 22 weeks including two weeks vacation</td>
<td>Spans 30 weeks including five weeks vacation</td>
</tr>
<tr>
<td></td>
<td>Theory 375 hrs 50 days</td>
<td>Theory 300 hrs 40 days</td>
</tr>
<tr>
<td></td>
<td>Practice 375 hrs 50 days</td>
<td>Practice 637.5 hrs 85 days</td>
</tr>
</tbody>
</table>

The balance of practice and theory for the programme is 59.3%/40.7% respectively (calculated on the basis of programme hours). The balance differs between modules depending on the stage of the programme and the nature of the module content and practice sequences. This ratio has been used based upon our experiences and feedback from past cohorts where a greater exposure to the clinical environment and
antenatal services particularly, was considered important for practice upon registration.

The first year aims to provide a sound foundation for normal midwifery practice, public health and health promotion and education via the modules: Foundation for Practice and Promoting Healthy Lifestyles. Continued application of this occurs through Year Two in the first semester with the module: Complex Health and Social Needs. This provides a spiralling link between public health and the role of the midwife. It develops your skills further towards complexity in semester two of Year Two with the module Complex Childbearing which focuses on childbearing related pathology. Developing clarity around the midwifery role in such circumstances remains important in terms of early responses to changing circumstances and physiological responses. The childbearing implications of altered physiology, pathophysiology and care needs enabling you to progress your knowledge towards that which is needed for NMC pre-registration midwifery requirements for the midwifery role when providing complex care and managing ill health within the context of a midwifery role.

Module content is arranged under the following headings:
- Studentship and graduate attributes
- Anatomy & physiology
- Evidence base & research
- Behavioural sciences & communication
- Midwifery practice (including skills)
- Medicines management (including complementary therapies)
- Professional role & responsibilities of a midwife including leadership
- Baby Friendly Initiative Standards (UNICEF).

The plan for your course can be found in the ‘Course Information’ folder within your course Blackboard site. Please note this is subject to change to ensure educational credibility.

4. AIMS AND PHILOSOPHY
The programme experiences are designed to create a climate of professional integrity and responsibility which facilitates you to:

- Show flexibility and adaptability to marry the dichotomy of women’s needs and service provision, making graduates attractive to employers and women
- Augment your existing self-motivation to act reflexively in analysing and creating your own personal learning opportunities, becoming an autonomous learner working productively with your Mentors and Personal Adviser
- Adapt your skills, learning and clinical reasoning to initiate service improvements which improve women’s experiences while always ensuring your practice is compassionate, sensitive and safe
- Provide responsive, compassionate care which is woman, partner and family centred which values diversity and is sensitive and respectful
- Produce safe competent practitioners, who will have graduate level skills including advanced communications skills, an enquiring approach to practice and sound problem solving abilities, making them attractive to potential employers.

Upon qualification as a newly qualified midwife, you will be confident and competent in your conduct of sensitive compassionate midwifery care. You will be capable of autonomous practice from the point of registration and demonstrate sound skills in critical reflection to advance your practice.

The newly qualified midwife will carefully consider the care she gives, designing care individually for each client and basing care upon sound, research-based knowledge. The newly qualified midwife will be able to debate and reflect upon any programme of action chosen. From the point of registration the newly qualified midwife will recognise the need for continuing personal and professional updating and development. You are encouraged to start to consider your needs for your period of preceptorship during your final practice allocation in Module Six.

This programme prepares students to be a lead practitioner in the provision of normal midwifery care while being able to co-ordinate and manage the delivery of complex care for women and families in vulnerable circumstances, and those with complex needs arising during childbearing. Within a climate of inter-professional and interagency practice they will use skills in critical analysis and evaluation of evidence from a variety of sources, synthesising such evidence to inform the cycle of midwifery care. It is expected that students will have the ability to seek evidence that is not readily available and critically engage in professional debate to provide safe and sensitive care which is individual to women and their families, while also being able to motivate self and others to contribute and initiate service reform.

The programme aims are set out below; upon successful completion of the programme students will be eligible to register as a midwife on the midwifery part of the NMC professional register and undertake the activities of a midwife as stated in the second EU Midwifery Directive (EU Second Midwifery Directive 80/155/EEC Article 4).
5. MEET THE COURSE TEAM

Nicky Hadlett – Course Director

Nicky qualified as a Registered General Nurse in 1986 at the Whittington Hospital, London, after working as a staff nurse in Rheumatology & Orthopaedics in Norfolk. She also qualified as a midwife at the Norfolk & Norwich Hospital in 1988. Nicky has held posts in the acute hospital Trust and community areas as a senior midwife until 1996 when she worked for the Soldiers, Sailors and Air Force Families Association being attached to the British Forces Germany. Nicky worked in other UK universities before joining UEA in 2001.

The Midwifery Team:

<table>
<thead>
<tr>
<th>Contact</th>
<th>Direct Line</th>
<th>Internal Ext. No.</th>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karen Bates</td>
<td>01603 597097</td>
<td>7097</td>
<td><a href="mailto:karen.bates@uea.ac.uk">karen.bates@uea.ac.uk</a></td>
</tr>
<tr>
<td></td>
<td>01553 613737 (QEH)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deborah Caine</td>
<td>01603 597105</td>
<td>7105</td>
<td><a href="mailto:d.caine@uea.ac.uk">d.caine@uea.ac.uk</a></td>
</tr>
<tr>
<td>Kenda Crozier</td>
<td>01603 597094</td>
<td>7094</td>
<td><a href="mailto:k.crozier@uea.ac.uk">k.crozier@uea.ac.uk</a></td>
</tr>
<tr>
<td>Nicky Hadlett</td>
<td>01603 597098</td>
<td>7098</td>
<td><a href="mailto:n.hadlett@uea.ac.uk">n.hadlett@uea.ac.uk</a></td>
</tr>
<tr>
<td>Anna Harris</td>
<td>01603 597095</td>
<td>7095</td>
<td><a href="mailto:anna.harris@uea.ac.uk">anna.harris@uea.ac.uk</a></td>
</tr>
<tr>
<td>Helen Meehan</td>
<td>01603 597077</td>
<td>7077</td>
<td><a href="mailto:h.meehan@uea.ac.uk">h.meehan@uea.ac.uk</a></td>
</tr>
<tr>
<td>Jayne Needham</td>
<td>01603 597079</td>
<td>7079</td>
<td><a href="mailto:j.needham@uea.ac.uk">j.needham@uea.ac.uk</a></td>
</tr>
<tr>
<td>Lead Midwife for Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kirsty Tweedie</td>
<td>01603 597078</td>
<td>7078</td>
<td><a href="mailto:k.tweedie@uea.ac.uk">k.tweedie@uea.ac.uk</a></td>
</tr>
<tr>
<td>Nicki Young</td>
<td>01603 597069</td>
<td>7069</td>
<td><a href="mailto:nicki.young@uea.ac.uk">nicki.young@uea.ac.uk</a></td>
</tr>
<tr>
<td>Georgina Sosa</td>
<td>01603 592639</td>
<td>2639</td>
<td><a href="mailto:Georgina.sosa@uea.ac.uk">Georgina.sosa@uea.ac.uk</a></td>
</tr>
<tr>
<td>Ruth Sanders</td>
<td>01603 591345</td>
<td>1345</td>
<td><a href="mailto:r.sanders@uea.ac.uk">r.sanders@uea.ac.uk</a></td>
</tr>
</tbody>
</table>
Lead Midwife for Education

This is a professional role required by the NMC for midwifery courses. The person holding this role provides the professional lead for midwifery provision by ensuring courses comply with the standards established by the NMC through effective operational and strategic working with relevant authorities and institutions involved with midwifery education and practice.

6. LEARNING OUTCOMES

The programme is structured to provide learning opportunities at academic Levels 4, 5 and 6. The arrangements for teaching and learning at these levels across the programme will comprise a balance of approaches including lectures, seminars, skills laboratory activities, tutorials, enquiry-based learning, e-learning and practice based learning.

Successful completion of the integrated practice and theoretical components of the full-time programme will prepare students who are able to:

- Achieve the NMC (2009) midwifery competencies, skills clusters and requirements for entry as a midwife on the NMC register to practise autonomously
- Meet the required standards for award of Bachelor of Science Honours – Midwifery (Higher Education Qualifications Framework (QAA 2008)
- Work in partnership with women to provide compassionate and sensitive midwifery care that effectively meets their needs and that of their families
- Apply knowledge of research methods, audit and clinical governance in order to assure their contribution to the provision of high quality midwifery care within the maternity services
- Use and adapt communication skills with women, families, multidisciplinary/multiagency services and healthcare professionals to contribute the midwifery dimension of care effectively and coordinate such involvement across pregnancy, labour and parenthood when part of the multidisciplinary team for complex health and social needs
- Use effective strategies to retrieve, interpret and apply evidence and experience to support critical decision making, reflecting NMC requirements for autonomous practice as the lead for normal midwifery (NMC 2009:17)
- Practise in creative ways to engage women and their families in behaviour which will impact positively upon the health of the fetus and the neonate, as well as the mother’s longer term health and that of her family
- Be a proficient, reflexive practitioner promoting a positive midwifery role model within the maternity services to the benefit of those with whom the midwife works, and those who receive midwifery care and support
- Constantly adapt transferable skills to achieve successful lifelong learning to support an autonomous role
- Develop individual qualities to effectively lead and manage midwifery practice.
7. CONTENT AND STRUCTURE

7.1 Key Features

You will undertake practice placements in our practice education partners’ local maternity units at the Norfolk & Norwich University Hospital NHS Foundation Trust (NNUH), Queen Elizabeth Hospital NHS Foundation Trust, Kings Lynn (QEH) or the James Paget University Hospital NHS Foundation Trust (JPUH). You will experience practice placements in more than one of these Trusts. Students will study together on most occasions to benefit from learning and sharing experiences with each other. All taught sessions will be held in Norwich, on UEA premises. You will undertake clinical practice in the above Trusts in hospital and community settings.

You are expected to take responsibility for your own learning. The curriculum is designed to help you to become a confident, proficient midwife with a reflective approach in your practice. There are six modules arranged so a theory and a practice module sit within each semester of the programme.

The Standards for Pre-registration Midwifery Education (NMC 2009) provide the key framework for the theoretical content and practice development across the programme. These competencies and Essential Skills Clusters naturally prepare you to address ‘the activities of the midwife’.

Terms and Modules:
- Each year consists of two semesters, also called modules
- All modules begin with a few weeks of university-based theoretical introduction, followed by a period of practice
- The first semester in each year contains twenty timetabled weeks with the second semester in each year containing twenty-five weeks
- You will have opportunity to visit practice areas for orientation during the theory time in Module One prior to commencing your practice
- Semesters in Years one and two contain more theory weeks than Year Three. This gives you longer in practice in Year Three to consolidate theoretical learning and competent practice skills for the midwifery role across pregnancy, labour, birth and the early weeks of parenthood.

7.2 Independent Learning weeks

A period of independent learning weeks is built into the end of Module Two, Four and Six. These weeks may take a variety of forms, however, the two weeks following Module Four are intended for you to undertake elective practice of your choice (guidance for elective practice is available from the School Elective Handbook on the HSC Studentzone Blackboard site).

The following is intended as a guide to help you plan and develop personal learning experiences for your independent learning weeks that will meet your individual learning needs. In the case of missed time you should discuss your plan for making up this time with your personal adviser / module organiser (and course director where necessary). Please refer to the School of Health Sciences Attendance and Engagement Policy.
To enable you to maximise your independent learning weeks you should:
- Prior to these weeks develop your own personal learning outcomes, which should include a rationale for your choice of learning experience.
- On completion of your independent learning weeks, evaluate your learning in the context of your personal learning outcomes and identify any areas that warrant further exploration, this may be in the form of an action plan.
- Include in your portfolio documentation surrounding your personal learning. This will be discussed during your end of year progression interview with your personal adviser.

The following are suggestions for activities you may like to consider for your independent learning weeks, this is not intended to be prescriptive, neither is it definitive, you may identify additional valuable learning experiences.
- To complement EU experiences that may be below target (this needs to be discussed with your personal adviser, who in turn will discuss with the course director).
- You may like to arrange educationally led visits to specific areas of interest. However these should first be discussed with your personal adviser to establish the educational value of any visits. Your personal adviser will liaise with the course director to ensure an overall profile of student visits is maintained.
- You may choose to explore specific areas of theory/practice by undertaking literature searches & evaluating the literature/evidence you obtain.

7.3 Portfolio

You are required by the NMC (2009) to maintain a portfolio. Portfolios provide a valuable aid to learning, enabling you to reflect on knowledge and skills acquired and identify areas that need further knowledge and understanding. The portfolio represents a valuable learning resource that you will use to inform assessment of your practice and theory. As such this becomes a key personal learning tool to evaluate progress and help review learning priorities with your mentor as well as becoming a growing profile of your progression across the programme.

You are required to use a structured reflection in a systematic manner for a specific practice focus in each module. You will also use this to help determine your progress and learning needs. It will also serve as a dynamic personal tool for capturing the analysis from significant learning situations as well as cross-cutting themes; for example communication and multiagency working. You will draw upon such accounts when discussing evidence of your progression and experience at regular formative review points across the practice allocation between you and your Mentor. You will also use your portfolio in the summative practice interview.

It is your responsibility to develop and maintain your portfolio, however, the personal adviser, module organiser, link lecturer and mentor are all in a position to guide you in this venture.
The portfolio is assessed on a pass/fail basis. A list of requirements for inclusion must be met to be awarded a pass. The portfolio also serves as a ‘home’ for practice assessment documentation and theoretical assessments. You will also retain the specific sheets which record evidence of working with midwives other than your mentor and spoke practice experience in your portfolio. This sheet is a requirement which is used to assist Mentors when you are engaged in key areas of learning with other midwives which contribute directly to learning outcomes.

The portfolio will be reviewed by your personal adviser at the end of each academic year in the annual review meeting in Semester Two. Verification that you have maintained a portfolio during the programme will be required by the Board of Examiners at the ‘final examination board’ in order for you to complete the programme. This is confirmed via the course director.

7.4 Progression points

Formal progression points sit at the end of each year of the programme. Contained within the theory and practice assessment guidelines for students and mentors for each module in semester two is a Progression Sign-Off Document. Your mentor is required to sign this document to confirm that you have completed all the practice learning outcomes for the year in question, are practicing at the relevant level and are ready to progress to practicing at the next level, or for Module Six are competent to enter the NMC professional register.

The programme is separated into three parts by two progression points. All students must meet all required outcomes including any re-assessment attempts before each of the progression points. These progression points are highlighted on assessment schedules provided for each Academic Year. Progression points are mapped to each Reassessment Examination Board meeting, specifically these correspond to week eight of Module Three (progression point one) and week eight of module five (progression point two). Students will not be permitted to progress to the next part of the programme unless all assessment items, including permitted reassessment attempts, have been successfully completed and all progression criteria and learning outcomes, (both theory and practice) achieved.

Exceptionally a student may continue up to week twelve of the subsequent academic year (week twelve of modules three or five) to enable achievement of programmes outcomes, for example in exceptional circumstances where an individual plan has been formally approved due to illness or a successful academic appeal process.

7.5 End of year meeting with Personal Adviser

At the end of each academic year, you will meet with your personal adviser. This meeting will provide an opportunity to review progress made over the year and for you and your personal adviser to raise any issues relevant to the programme. You are responsible for arranging this meeting in each year in semester two. The appropriate form for documenting this meeting can be found on the HSC Studentzone Blackboard site. You need to retain the record of this in your portfolio for each year of the programme.
7.6 Module Outlines

Full module information can be accessed via evision or your course/module blackboard site where applicable.

7.7 Assessments

Assignment formatting guidance
Follow Health Sciences’ standard formatting for written assignments unless otherwise told by your module organiser. The full guidance is available via Studentzone Blackboard within Policies and Processes/Guidance and Advice. Refer to your theory and practice assessment guidelines for students and mentors.

7.8 Placements

All placements during the programme are carefully planned to maximise the opportunities for you to learn the skills needed in midwifery practice and to meet the requirements of the NMC and the EU. You are required to record specific experiences in your Student Passport (Red Book) in order to provide evidence that the requirements for registration have been met.

You will undertake practice placements in more than one of our practice education partners local maternity units at the Norfolk & Norwich University Hospital NHS Foundation Trust (NNUH), Queen Elizabeth Hospital NHS Foundation Trust, King’s Lynn (QEH) or the James Paget University Hospital NHS Foundation Trust (JPUH). You will gain experience in placements within community and hospital based services where midwives practice. Your Hub and Spoke placement experience will be managed from these placements with spoke activity being managed by either you and your mentor or your module organiser. You will be advised in more detail of this during your placement preparation sessions which take place before placements commence. These are timetabled sessions which will help you understand the range of services and how they apply to your module and the placement experience as well as the arrangements in place for accessing such experiences.

The practice component of learning within practice creates a direct relationship between the module content and the practice learning outcomes and associated learning opportunities. You are expected to take responsibility for your learning in directing learning needs through regular discussion with your mentor. The formal process of practice learning supports you through an organised structure for establishing needs and expectations as well as the required areas of learning.

In your final community based practice allocation in year three you are required to manage the care of a number of women receiving a midwifery model of care. This model of practice enables your mentor to determine your decision-making ability for the management of normal midwifery led care. The educationally-led caseload is commenced only upon the basis of a successful formative interview around the point of week four five of the community practice allocation. If it is recognised you are displaying ability which is consistent with a supervised practitioner level and are showing firm progression towards competence, the decision to commence the caseload, incrementally, is taken jointly between link lecturer, mentor and yourself.
Guidance is provided to support this stage of the learning process in practice. This has been a feature for considerable time and is firmly embedded in all current pre-registration midwifery provision through well-established processes. Clearly structured action plans are developed where you do not show capability. Caseload practice is only conducted when all are agreed you are capable. During the final module of the programme (module 6) you are signed off by your mentor for the NMC Pre-registration Competencies (NMC 2009:17) which are necessary for eligibility for registration.

**Norfolk and Norwich University Hospitals NHS Foundation Trust**

The Norfolk and Norwich University Hospitals NHS Foundation Trust Maternity services provide care for approximately six thousand births per year. It is the main tertiary referral unit in the area for high risk pregnancies and severe preterm neonates, taking referrals from the whole of region. The geographical patch is large and made up of urban and rural areas with pockets of deprivation.

There are eight teams providing community based midwifery services. Hospital services are provided within consultant led antenatal clinics, a fetal medicine unit and midwifery led antenatal assessment unit. In-patient facilities include twenty nine postnatal beds, in addition to five transitional care beds and thirteen Antenatal beds. The Delivery Suite has fifteen birthing rooms including a birthing pool, two obstetric theatres, anesthetic and recovery rooms, providing a full range of facilities for high dependency care, in addition to the new Maternity Assessment area for those clients requiring day attendance and review. The co-located Midwifery Led Birthing Unit comprising of four birthing rooms with water birth facilities is also available for women meeting the low risk criteria.

Currently there are two hundred and forty seven WTE midwives employed within the Trust. Midwives have a commitment to provide one-to-one care to all women in established labour and staffing levels have recently been improved to support this. The Trust is proud to have achieved and maintained level three BFI accreditation.

**The Queen Elizabeth Hospital King’s Lynn NHS Foundation Trust**

The Queen Elizabeth provides services for women in West Norfolk, Cambridgeshire and South Lincolnshire.

The hospital delivers approximately two thousand four hundred babies a year with a large cohort of women having antenatal and postnatal care by the midwives but not delivering their baby at the unit.

The midwifery establishment consists of ninety WTE midwives. The service provides inpatient services at the QEH site as well as outpatient services at QEH, North Cambridgeshire Hospital at Wisbech and community midwifery services across the community area offering care from GP surgeries, community hospitals and children centres.

The maternity services are supported by a level two neonatal unit and a range of gynaecology outpatient services are also provided.
The QEH offers all choices for delivery, homebirth, an alongside midwifery led unit (Waterlily) and the Obstetric run delivery suite. The Waterlily Birthing Centre opened in December 2015. This environment enables the provision of holistic midwifery care and enhances the woman’s experience of normality. In 2017/18, the trust had a 4% homebirth rate and 18% of deliveries within the Waterlily birth centre.

There have been many developments in services over the last year, these include introduction of Hypnobirthing and a post-dates clinic using complementary therapies.

We are very keen to support student midwives and ensure that they get a positive and varied experience to enhance their learning but also ensure that they are fully prepared when finally qualifying as a midwife.

**James Paget University Hospitals NHS Foundation Trust**

The JPUH has approximately two thousand two hundred births per year. The midwives operate on a rotational basis, between both the community and hospital setting.

The ANC offers daily clinic appointments for women who require consultant-led care, as well as specialist clinics including diabetic and vaginal birth after section.

Maternity triage offers a twenty-four hour service that can be accessed directly by the women, community midwives or GP’s, which ensures that women are assessed in the right place, by the right people, in a timely manner. It is situated on delivery suite and it offers three assessment beds. The unit is staffed by a midwife, however the women often require an obstetric team review whereby an individualised plan of care is put in place for them.

The recently refurbished delivery suite boasts five en-suite birthing rooms, a pool room (for women with an appropriate risk assessment), an observation bay and a bereavement suite. Adjacent to the delivery suite is a designated obstetrics theatre with adjoining recovery area.

The midwifery-led birthing unit comprises of three en-suite birthing rooms, two with pools to facilitate water births. There is access to bean bags, birthing balls and floor mats to encourage active labour and birth, and pullout beds for the immediate postnatal period. A small kitchen is available for women and their families to use.

There are two community midwifery teams that cover a large geographical area. The midwives hold a caseload and operate on an on-call system to cover a homebirth service. The Eden Team is a team of specialist midwives who support vulnerable women and their families. Their specialism include mental health, teenage, safeguarding, domestic violence and substance misuse.

Additionally, the JPUH offers a level one neonatal unit and gynaecology services (early pregnancy, fertility and inpatients/outpatients).
7.8.1 Continuity of Carer cases

You will identify with three cases per year with the aim of completing with two cases. The focus in Year One will be that of midwifery-led care and improving health, while Year Two will focus on more complex cases involving women with circumstances making them vulnerable and obstetric led cases. In Year Three, cases will focus on the management and decision-making for midwifery-led cases. Rawson (2010) and Aune (2011) highlight the benefits of your learning within caseloads in that you will be better equipped to assess, interpret and understand women’s needs. This approach serves as a learning process across the practice experience of each year enabling you to capture the consequences of decisions as well as clinical outcomes; it gives a reality of care and its impact upon the woman's family life. Continuity cases will normally reflect the nature of the modules in that year in the context of the relevant modules learning outcomes.

You will be able to access additional guidance, including examples, to help you select continuity cases for each module via your programme Blackboard site.

7.8.2 Professional behaviour

Registered midwives are bound by the NMC (2015) *The Code: Professional standards of practice and behaviour for Nurses and Midwives*, and it is therefore expected that the behaviour of students follow this code. Your professional behaviour must:

- Make the care of people your first concern treating them as individuals and respecting their dignity
- Work with others to protect and promote the health and wellbeing of those in your care, their families and carers, and the wider community
- Provide a high standard of practice and care at all times
- Be open and honest, act with integrity and uphold the reputation of your profession. (NMC 2015)

The NMC (2009) *Guidance on professional conduct for nursing and midwifery students* sets out the personal and professional conduct expected of you as a midwifery student. You should be familiar with this document and use it alongside the NMC (2015) *The Code: Professional standards of practice and behaviour for Nurses and Midwives*. Comprehensive information about professional behaviour and conduct can be found in the above mentioned documents, in addition there will be theory sessions surrounding professional behaviour and conduct.

7.9 Interprofessional Learning (IPL)

“Interprofessional Education occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care”

(Centre for the Advancement of Interprofessional Education, 2002)

The principal aim of IPL is to improve care delivery by developing knowledge, skills, attitudes and behaviour that facilitate effective interprofessional collaboration.

Pre-registration IPL provides students across health and social care courses opportunities to work together at every level of their training.
Throughout the programme you will have the opportunity to learn about the roles of other healthcare professions and gain valuable insight into the contribution that different professions offer to the experience of service users.

7.10 Important information

7.10.1 Attendance Policy

The programme is based upon students attending the full complement of theory and practice sessions. The programme comprises six modules which together span three years and is inclusive of vacation and public holidays. The vacation for this programme is fixed and included, and cannot deviate from the set weeks. Please do not book any holidays outside of vacation weeks as this will not be honoured. Public holidays are included where specified on your programme, however some public holidays are spent in practice.

Please refer to the School Attendance and Engagement Policy available via the HSC Studentzone Blackboard site.

7.10.2 Uniform Requirements

Attendance at your scheduled uniform fitting is mandatory. This provides an opportunity for you to try on uniforms to ensure you order the correct size and fit. The scheduled fitting dates will be detailed in your induction timetable.

Please note that failure to attend the uniform fitting and/or to submit your uniform order form could result in delays with your uniform being delivered. You CANNOT ATTEND PLACEMENT unless you have a UEA student uniform.

Please contact the Local Support team, 01603 597001 or ecb.reception@uea.ac.uk prior to your uniform fitting to discuss any additional uniform requirements you may have due to cultural beliefs or medical grounds. (Hijabs can be provided in black or blue. Please advise the uniform company during your fitting if this is required).

7.10.3 Course specific awards

The School of Health Sciences offers a student award for ‘Best Overall Academic Performance - BSc Hons Pre-registration Programmes with a £100 prize.

7.10.4 Declaration of good character

On completion of your programme, and prior to your registration on the Professional Register maintained by the Nursing and Midwifery Council (NMC), the Lead Midwife for Education will need to provide the NMC with details of your satisfactory programme completion (Theory and practice) and a Declaration of Good Health and Good Character, as required for professional registration.
You should be aware that, at the end of your programme, the School will provide references to prospective employers and these will contain details on professional behaviour both in class and while on placement, and of the degree awarded.

7.10.5 Paid employment

We advise you not to participate in paid employment outside of your normal programme activities.

Should you fail to achieve the required standard of performance, the fact that you have undertaken paid employment will not be accepted as a mitigating circumstance. It is stressed that the School advises you not to undertake any outside employment given the demanding nature of the course.

If you are found to be absent from the course because you are undertaking paid employment you will be dealt with under the University’s General Regulations for Students on Professional Misconduct and Unsuitability (Regulation 14). Under these Regulations, you may be suspended or required to withdraw from the University. Under no circumstances will the School provide a reference for you if you are seeking paid employment during the course. However, if you require a reference for any paid employment outside the programme during the first and second year you can now print your own confirmation of study letter from the ‘Proof of study’ container within evision.

Time spent in any paid health care practice outside the curriculum (eg as a health care assistant) cannot be counted against time missed on clinical placement during the course.

8. USEFUL LINKS AND RESOURCES

8.1 Websites

Australian breastfeeding association – especially for partners
As Australia’s leading authority on breastfeeding, they support, educate and advocate for a breastfeeding inclusive society.

Babycentre – pregnancy for men
Top pregnancy resources for dads to be.

Breastfeeding Network
The Breastfeeding Network (BfN) aims to be an independent source of support and information for breastfeeding women and others.

Health talk on line
An award-winning website of the DIPEx charity providing a forum for people to share experiences of health and illness from the perspective of the user and family.

Institute of Health Equity UCL
Working towards greater health equity through action on the social determinants of health.

**International Confederation of Midwives**
The International Confederation of Midwives (ICM) supports, represents and works to strengthen professional associations of midwives throughout the world. There are currently 131 Midwives Associations, representing 113 countries across every continent. ICM is organised into four regions: Africa, the Americas, Asia Pacific and Europe. Together these associations represent 500,000 midwives globally.

**Leading change, adding value**
(2016) Leading change, adding value, a framework for nursing, midwifery and care staff

**Mothers and babies: reducing risk through audits and confidential enquiries in the UK (MBRRACE-UK)**
MBRRACE-UK is the collaboration appointed by the Healthcare Quality Improvement Partnership to continue the national programme of work investigating maternal deaths, stillbirths and infant deaths, including the Confidential Enquiry into Maternal Deaths.

**Neonatology on the web**
Links to Neonatology web sites

**NHS England**
NHS England leads the National Health Service (NHS) in England. We set the priorities and direction of the NHS and encourage and inform the national debate to improve health and care.

**NHS England – Sustainable improvement team**
The Sustainable Improvement Team (formerly NHS Improving Quality) is one of the driving forces for improvement across the NHS

**NHS Institute of Innovations and Improvements**
Supporting foundation trusts and NHS trusts to give patients consistently safe, high quality, compassionate care within local health systems that are financially sustainable.

**The Nursing and Midwifery Council**
The nursing and midwifery regulator for England, Wales, Scotland and Northern Ireland.

**The Picker Institute**
Picker Institute sponsors education and research in the field of patient-centered care in cooperation with educational institutions and other interested entities and individuals

**Patient centred improvement guide**
The Resuscitation Council UK
The newborn life support guidelines and information can be found online at the Resuscitation Council UK

Royal College of Midwives
The only professional organisation and trade union dedicated to serving midwifery and the whole midwifery team. We provide workplace advice and support, professional and clinical guidance and information, and learning opportunities with our broad range of events, conferences and online resources

Royal College of Obstetricians and Gynaecologists
The RCOG works to improve women’s health care across the world

UK National Screening Committee
Population screening programmes

UNICEF UK Baby Friendly Initiative UK
It is designed to support breastfeeding and parent infant relationships by working with public services to improve standards of care

8.2 Journals

Archives of Diseases in Childhood (fetal & neonatal edition)
British Journal of Midwifery
British Journal of Obstetrics and Gynaecology
Evidence Based Practice Midwifery
Journal of Advanced Nursing
Journal of Neonatal Nursing
Journal of Paediatrics
The Lancet
MIDIRS Midwifery Digest
Midwifery
Neonatal Network Seminars in Neonatology
Paediatric Nursing
Pregnancy and childbirth online journal
Sociology of Health and Illness

9. COURSE READING

Access your reading list now

Alongside making notes in your lectures and discussing topics in seminars, reading is a core part of obtaining knowledge in any degree. Your reading lists for each module will be available through an online system. Please click on the link below and enter your module title or module code to access each list
https://uea.rl.talis.com/index.html

Once you are at UEA you will be able to access your reading lists directly through your online modules (via Blackboard); but before you arrive you can use the steps
above to look at the reading you will be expected to engage with. This will give you a better feel for the topics covered in your course.

Each module will have its own reading list and items will be recorded as 'core' or 'further' reading. This allows you to know what sources are mandatory for you to do well in the course and which are additional - if you are interested in exploring the topic further.

If you would like to get a head start on your reading please feel free to do so but we would advise that you do not buy any books yet until you explore what the UEA library has to offer.